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APPLICANTS

George Heavner, Malvern, PA;
 David M. Knight, Berwyn, PA;
 Jill Giles-Komar, Downingtown, PA; Bernard Scallon, Collegeville, PA;
 David Shealy, Downingtown, PA;

** CONTINUING DATA ***** *OK* *1/6/06*
 This appln claims benefit of 60/223,360 08/07/2000
 and claims benefit of 60/236,826 09/29/2000

** FOREIGN APPLICATIONS ***** *NO* *OK* *1/6/06*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 10/22/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY PA	SHEETS DRAWING 26	TOTAL CLAIMS 101	INDEPENDENT CLAIMS 41
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials <i>[Initials]</i>	

ADDRESS
 27777
 PHILIP S. JOHNSON
 JOHNSON & JOHNSON
 ONE JOHNSON & JOHNSON PLAZA
 NEW BRUNSWICK , NJ
 08933-7003

TITLE
 Anti-TNF antibodies, compositions, methods and uses

<input type="checkbox"/> All Fees
<input type="checkbox"/> 1.16 Fees (Filing)

FILING FEE RECEIVED 5208	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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